

UNITED STATES BANKRUPTCY COURT
Northern DISTRICT OF Georgia
Atlanta DIVISION

IN RE:

Rita Ann Rose

DEBTOR.

CASE NUMBER:

15-71563 MGD

JUDGE

CHAPTER 11

DEBTOR'S MONTHLY OPERATING REPORT (INDIVIDUAL)

FOR THE PERIOD
FROM Feb TO Feb 28, 2018

Comes now the above-named debtor and files its Monthly Operating Report in accordance with the Guidelines established by the United States Trustee and FRBP 2015.

Dated: 3/15/2018

Slomka
Attorney for Debtor

Debtor's Address

and Phone Number:

1217 V. Haggard Rd SE
Atlanta, GA 30338

Tel. _____

Attorney's Address

and Phone Number:

2859 Paces Ferry Rd SE
Suite 1700
Atlanta, GA 30339
Bar No. 652875
Tel. (404) 800-4017

Note: The original Monthly Operating Report is to be filed with the court and a copy simultaneously provided to the United States Trustee. Monthly Operating Reports must be filed by the 20th day of the following month.

For assistance in preparing the Monthly Operating Report, refer to the following resources on the United States Trustee Program website, http://www.usdci.gov/usttr21/rep_info.htm.

- 1) Instructions for Preparation Debtor's Chapter 11 Monthly Operating Report
- 2) Initial Filing Requirements
- 3) Frequently Asked Questions (FAQs)

SUMMARY OF CASH RECEIPTS AND CASH DISBURSEMENTS

Case Name:
Case Number:

Note: The information requested below is a summary of the information reported the various Schedules and Attachments contained within this report.

	Month	Cumulative Total
CASH- Beginning of Month (Household)	2/10/13	
CASH- Beginning of Month (Business)	—	
Total Household Receipts	3,516.00	
Total Business Receipts	—	
Total Receipts		
Total Household Disbursements	3,580.49	
Total Business Disbursements	—	
Total Disbursements		
NET CASH FLOW (Total Receipts minus Total Disbursements)		
CASH- End of Month (Individual)	— 45.05	
CASH- End of Month (Business)	—	

CALCULATION OF DISBURSEMENTS FOR UNITED STATES TRUSTEE QUARTERLY FEES

TOTAL DISBURSEMENTS (From Above)		
Less: Any Amounts Transferred or Paid from the Business Account to the Household Account (i.e., Salary Paid to Debtor or Owner's Draw)		
DISBURSEMENTS FOR U.S. TRUSTEE FEE CALCULATION		

I declare under penalty of perjury that this statement and the accompanying documents and reports are true and correct to the best of my knowledge and belief.

This 15 day of March 2015

Debtor's Signature

11:36 AM

03/09/18

Rita Rose
Reconciliation Summary
Rita Rose, Period Ending 02/28/2018

	Feb 28, 18
Beginning Balance	210.13
Cleared Transactions	
Checks and Payments - 15 items	-3,580.49
Deposits and Credits - 8 items	3,516.00
Total Cleared Transactions	-64.49
Cleared Balance	145.64
Uncleared Transactions	
Checks and Payments - 5 items	-136.64
Deposits and Credits - 3 items	0.00
Total Uncleared Transactions	-136.64
Register Balance as of 02/28/2018	9.00
New Transactions	
Checks and Payments - 8 items	-1,964.05
Deposits and Credits - 4 items	1,910.00
Total New Transactions	-54.05
Ending Balance	-45.05

11:41 AM

03/09/18

Rita Rose
Reconciliation Detail
Rita Rose, Period Ending 02/28/2018

Type	Date	Num	Name	Clr	Amount	Balance
Beginning Balance						210.13
Cleared Transactions						
Checks and Payments - 15 items						
Bill Pmt -Check	02/02/2018	1395	Wells Fargo Home ...	X	-649.83	-649.83
Bill Pmt -Check	02/02/2018	1389	Emcompass Home ...	X	-444.58	-1,094.41
Bill Pmt -Check	02/02/2018	1388	Comcast 1111	X	-175.94	-1,270.35
Bill Pmt -Check	02/02/2018	1393	True Natural Gas	X	-146.08	-1,416.43
Bill Pmt -Check	02/02/2018	1394	True Natural Gas 4 ...	X	-115.05	-1,531.48
Bill Pmt -Check	02/02/2018	1390	Florida Power	X	-107.49	-1,638.97
Bill Pmt -Check	02/02/2018	1391	Georgia Power	X	-94.09	-1,733.06
Bill Pmt -Check	02/02/2018	1392	Thomas Eye Group	X	-27.59	-1,760.65
Bill Pmt -Check	02/14/2018	1399	Harbortown Village ...	X	-1,458.00	-3,218.65
Bill Pmt -Check	02/14/2018	1396	Comcast	X	-185.42	-3,404.07
Bill Pmt -Check	02/14/2018	1401	North Perimeter An. ...	X	-22.96	-3,427.03
Check	02/20/2018	debit	Krogers	X	-54.98	-3,482.01
Check	02/20/2018	debit	Asian Cafe	X	-40.72	-3,522.73
Check	02/22/2018	debit	Krogers	X	-54.76	-3,577.49
Check	02/28/2018	eft	Suntrust	X	-3.00	-3,580.49
Total Checks and Payments					-3,580.49	-3,580.49
Deposits and Credits - 9 items						
Deposit	02/01/2018			X	700.00	700.00
Deposit	02/01/2018			X	850.00	1,550.00
Deposit	02/13/2018	dep	Suntrust	X	200.00	1,750.00
Deposit	02/13/2018	dep	Suntrust	X	1,661.00	3,411.00
Deposit	02/14/2018	eft	Suntrust	X	25.00	3,436.00
Deposit	02/20/2018	1382...	Suntrust	X	80.00	3,516.00
Bill Pmt -Check	03/03/2018	1405	Harbortown Village ...	X	0.00	3,516.00
Bill Pmt -Check	03/03/2018	1410	Emcompass Home ...	X	0.00	3,516.00
Check	03/05/2018	dep	Daniel E. Rose	X	0.00	3,516.00
Total Deposits and Credits					3,516.00	3,516.00
Total Cleared Transactions					-64.49	-64.49
Cleared Balance					-64.49	145.64
Uncleared Transactions						
Checks and Payments - 5 items						
Check	01/31/2017	eft	Microtel		-1.00	-1.00
Check	11/30/2017				-3.00	-4.00
Bill Pmt -Check	02/14/2018	1398	Dekalb County Rem...		-63.88	-67.88
Bill Pmt -Check	02/14/2018	1397	Daniel S Goodman		-46.99	-114.87
Bill Pmt -Check	02/14/2018	1400	Laureate Medical G...		-21.77	-136.64
Total Checks and Payments					-136.64	-136.64
Deposits and Credits - 3 items						
Bill Pmt -Check	12/26/2015	1010	Georgia Power		0.00	0.00
Bill Pmt -Check	07/12/2017	1298	Atlanta Neurology Po		0.00	0.00
Bill Pmt -Check	07/12/2017	1290	Comcast		0.00	0.00
Total Deposits and Credits					0.00	0.00
Total Uncleared Transactions					-136.64	-136.64
Register Balance as of 02/28/2018					-201.13	9.00
New Transactions						
Checks and Payments - 8 items						
Bill Pmt -Check	03/03/2018	1409	Wells Fargo Home ...		-636.11	-636.11
Bill Pmt -Check	03/03/2018	1408	U. S. Trustee Paym...		-325.82	-961.93
Bill Pmt -Check	03/03/2018	1402	Comcast 1111		-175.94	-1,137.87
Bill Pmt -Check	03/03/2018	1406	True Natural Gas		-130.91	-1,268.78
Bill Pmt -Check	03/03/2018	1407	True Natural Gas 4...		-125.08	-1,393.86
Bill Pmt -Check	03/03/2018	1404	Georgia Power		-75.92	-1,469.78
Bill Pmt -Check	03/03/2018	1403	Florida Power		-49.69	-1,519.47
Check	03/04/2019	eft	Emcompass Home ...		-444.58	-1,964.05
Total Checks and Payments					-1,964.05	-1,964.05

11:41 AM

03/09/18

Rita Rose
Reconciliation Detail
Rita Rose, Period Ending 02/28/2018

Type	Date	Num	Name	Clr	Amount	Balance
Deposits and Credits - 4 items						
Deposit	03/03/2018	dep	Rita Rose		700.00	700.00
Deposit	03/03/2018	dep	Rita Rose		850.00	1,550.00
Deposit	03/05/2018	eft	Rita Rose		160.00	1,710.00
Deposit	03/05/2018	dep	Daniel E. Rose		200.00	1,910.00
Total Deposits and Credits					1,910.00	1,910.00
Total New Transactions					-54.05	-54.05
Ending Balance					-255.18	-45.05

**SCHEDULE OF HOUSEHOLD
CASH RECEIPTS AND CASH DISBURSEMENTS**

	Month	Cumulative Total
CASH - Beginning of Month	210.13	
CASH RECEIPTS		
Salary or Cash from Business		
Wages from Other Sources (attach list to this report)		
Interest or Dividend Income		
Alimony or Child Support	1661.00	
Social Security/Pension/Retirement		
Sale of Household Assets (attach list to this report)		
Loans/Borrowing from Outside Sources (attach list to this report)		
Other (specify) (attach list to this report)	400.00 Rent	300.00 1530.00
TOTAL RECEIPTS		
CASH DISBURSEMENTS		
Alimony or Child Support Payments		
Charitable Contributions		
Gifts		
Household Expenses/Food/Clothing	109.77	
Household Repairs & Maintenance		
Insurance		
IRA Contribution		
Lease/Rent Payments		
Medical/Dental Payments	1517.82	
Mortgage Payment(s)		
Other Secured Payments		
Taxes - Personal Property		
Taxes - Real Estate		
Taxes Other (attach schedule)		
Travel & Entertainment	40.92	
Tuition/Education		
Utilities (Electric, Gas, Water, Cable, Sanitation)	621.42	
Vehicle Expenses		
Vehicle Secured Payment(s)		
U. S. Trustee Quarterly Fees		
Professional Fees (Legal, Accounting)		
Other (attach schedule)	300.00 Computer	185.70
Total Household Disbursements		
CASH - End of Month (Must equal reconciled bank statement- Attachment No. 2)	45.45	

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03/09/18
Accrual Basis

Rita Rose
Profit & Loss Detail
February 2018

Type	Date	Num	Name	Memo	Clr	Split	Amount	Balance
Ordinary Income/Expense								
Income								
Rental Income								
Deposit	02/01/2018		396 Norton Circle	Deposit		Rita Rose	850.00	850.00
Deposit	02/01/2018		4751 Winters Chap...	Deposit		Rita Rose	700.00	1,550.00
Total Rental Income							1,550.00	1,550.00
Total Income							1,550.00	1,550.00
Gross Profit								
Expense								
Bank Service Charges								
Check	02/28/2018	61	Suntrust			Rita Rose	3.00	3.00
Total Bank Service Charges							3.00	3.00
Computer and Internet Expenses								
Bill	02/02/2018	0274...	Comcast			Accounts Pay...	185.42	185.42
Total Computer and Internet Expenses							185.42	185.42
Groceries								
Check	02/20/2018	debit	Kroger's			Rita Rose	54.98	54.98
Check	02/22/2018	debit	Kroger's			Rita Rose	54.76	109.74
Total Groceries							109.74	109.74
Meals and Entertainment								
Check	02/20/2018	debit	Action Cafe			Rita Rose	40.72	40.72
Total Meals and Entertainment							40.72	40.72
Medical Expense								
Bill	02/13/2018	0673...	Emory St. Joseph's ...	equipment		Accounts Pay...	93.10	93.10
Bill	02/14/2018	0000...	North Piedmonte An...			Accounts Pay...	22.96	116.06
Bill	02/14/2018	7994...	Laureate Medical G...			Accounts Pay...	21.77	137.83
Bill	02/14/2018	1529...	Daniel S Goodman			Accounts Pay...	25.22	163.05
Bill	02/14/2018	1586...	Daniel S Goodman			Accounts Pay...	21.77	184.82
Total Medical Expense							184.82	184.82
Utilities								
Bill	02/02/2018	2472...	DeKalb County Rem...			Accounts Pay...	63.88	63.88
Bill	02/13/2018	0027...	Comcast 1111			Accounts Pay...	0.00	63.88
Bill	02/13/2018	0027...	Comcast 1111			Accounts Pay...	175.94	239.82
Bill	02/13/2018	23082	Georgia Power			Accounts Pay...	75.92	315.74
Bill	02/13/2018	6841...	Florida Power			Accounts Pay...	49.69	365.43

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Accrual Basis

Rita Rose
Profit & Loss Detail
February 2018

Type	Date	Num	Name	Memo	Clr	Split	Amount	Balance
Bill	02/20/2018	7685...	True Natural Gas 4...			Accounts Pay...	125.08	490.51
Bill	02/20/2018	7686...	True Natural Gas			Accounts Pay...	130.91	621.42
Total Utilities							621.42	621.42
Total Expense							1,145.12	1,145.12
Net Ordinary Income							404.88	404.88
Other Income/Expense								
Other Income								
Other Income Loan								
Deposit	02/13/2018	dep	Suntrust	transfer from ...		Rita Rose	200.00	200.00
Deposit	02/14/2018	eft	Suntrust	transfer from ...		Rita Rose	25.00	225.00
Deposit	02/20/2018	1382...	Suntrust	transfer from ...		Rita Rose	80.00	305.00
Total Other Income Loan							305.00	305.00
Social Security								
Deposit	02/13/2018	dep	Suntrust			Rita Rose	1,661.00	1,661.00
Total Social Security							1,661.00	1,661.00
Total Other Income							1,966.00	1,966.00
Net Other Income							1,966.00	1,966.00
Net income							2,370.88	2,370.88

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03/09/18

Accrual Basis

Rita Rose
Profit & Loss
February 2018

	<u>Feb 18</u>
Ordinary Income/Expense	
Income	
Rental Income	1,550.00
Total Income	<u>1,550.00</u>
Gross Profit	1,550.00
Expense	
Bank Service Charges	3.00
Computer and Internet Expenses	185.42
Groceries	109.74
Meals and Entertainment	40.72
Medical Expense	184.82
Utilities	621.42
Total Expense	<u>1,145.12</u>
Net Ordinary Income	404.88
Other Income/Expense	
Other Income	
Other Income Loan	305.00
Social Security	1,661.00
Total Other Income	<u>1,966.00</u>
Net Other Income	<u>1,966.00</u>
Net Income	<u><u>2,370.88</u></u>

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03/09/18
Accrual Basis

Rita Rose
Balance Sheet
As of February 28, 2013

	<u>Feb 28, 18</u>
ASSETS	
Current Assets	
Checking/Savings	
Rita Rose	9.00
Total Checking/Savings	9.00
Total Current Assets	9.00
TOTAL ASSETS	<u>9.00</u>
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	2,559.90
Total Accounts Payable	2,559.90
Other Current Liabilities	
Mortgage	-30,125.89
Total Other Current Liabilities	-30,125.89
Total Current Liabilities	-27,565.99
Total Liabilities	-27,565.99
Equity	
Opening Balance Equity	100.00
Retained Earnings	24,524.35
Net Income	2,950.64
Total Equity	27,574.99
TOTAL LIABILITIES & EQUITY	<u>9.00</u>



Account Statement

RITA ROSE DIP
CASE #1571563
1217 VILLAGE TERRACE CT
DUNWOODY GA 30338-2318

Questions? Please call
1-800-786-8787

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Account Summary	Account Type	Account Number	Statement Period
	ESSENTIAL CHECKING	XXXXXXXXXX 4828	02/01/2018 - 02/28/2018
	Description	Amount	Description
	Beginning Balance	\$210.13	Average Balance
	Deposits/Credits	\$3,516.00	Average Collected Balance
	Checks	\$3,427.03	Number of Days in Statement Period
	Withdrawals/Debits	\$153.46	28
	Ending Balance	\$145.64	

Overdraft Protection	Account Number 1000191004828	Protected By *****4844
For more information about SunTrust's Overdraft Services, visit www.suntrust.com/overdraft .		

Transaction History

Transaction History			Deposits/ Credits	Withdrawals/ Debits	Current Balance
Date	Check #	Transaction Description Details			
02/01		Beginning Balance			210.13
02/05		Deposit	700.00		
02/05		Deposit	850.00		1,760.13
02/08	1392	Check		27.59	1,732.54
02/09	1390	Check		107.49	
02/09	1391	Check		94.09	
02/09	1394	Check		115.05	
02/09	1393	Check		146.08	1,269.83
02/12	1395	Check		649.83	
02/12	1388	Check		175.94	444.06
02/14		Online Banking Transfer From 0175 00001000191004844	25.00		469.06
02/16	1389	Check		444.58	24.48
02/20		Online Banking Transfer From 0175 00001000191004844	80.00		
02/20		Point of Sale Debit TR DATE 02/17 Kroger Dunwoody Ga 40021066		54.98	
02/20		Check Card Purchase TR DATE 02/17 Asian Cafe Dunwoody Ga		40.72	8.78
02/21		Electronic/ACH Credit SSA Treas 310 Xxsoc Sec *****7891A SSA	1,661.00		
02/21		Online Banking Transfer From 0175 00001000191004844	200.00		1,869.78
02/22		Point of Sale Debit TR DATE 02/22 Kroger Dunwoody Ga 40021003		54.76	1,815.02
02/26	*1401	Check		22.96	1,792.06

SUNTRUST BANK
PO BOX 305183
NASHVILLE, TN 37230-5183

Page 2 of 3
63/E00/0175/0/11
02/28/2018



Account Statement

Transaction History

Date	Check #	Transaction Description Details	Deposits/ Credits	Withdrawals/ Debits	Current Balance
02/27	*1399	Check		1,458.00	
02/27	*1396	Check		185.42	148.64
02/28		Paper Statement fee		3.00	145.64
02/28		Ending Balance			145.64
Credit and Debit Totals			\$3,516.00	\$3,580.49	

* Indicates break in check number sequence. Check may have been processed electronically and listed as an Electronic/ACH transaction.
The Ending Daily Balances provided do not reflect pending transactions or holds that may have been outstanding when your transactions posted that day. If your available balance wasn't sufficient when transactions posted, fees may have been assessed.
For more information, including details related to fees and balances, please sign on to Online Banking.

Balance Activity History	Date	Balance	Collected Balance	Date	Balance	Collected Balance
	02/01	210.13	210.13	02/20	8.78	8.78
	02/05	1,760.13	1,760.13	02/21	1,869.78	1,869.78
	02/08	1,732.54	1,732.54	02/22	1,815.02	1,815.02
	02/09	1,269.83	1,269.83	02/26	1,792.06	1,792.06
	02/12	444.06	444.06	02/27	148.64	148.64
	02/14	469.06	469.06	02/28	145.64	145.64
	02/16	24.48	24.48			

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1 At least one borrower on the loan must be certified, accredited, or licensed as one of the following: Dental Hygienist, Nurse, Physician Assistant, Occupational Therapist, or Speech Language Pathologist (Speech Therapist). Income restrictions may apply. Applications must be received by April 13, 2018 and close by May 25, 2018.

2 Additional down payment may be required if property is in a declining market or if required by state regulations.

Equal Housing Lender. SunTrust Mortgage, Inc., NMLS #2915

**SCHEDULE OF BUSINESS
CASH RECEIPTS AND CASH DISBURSEMENTS**

	Month	Cumulative Total
CASH - Beginning of Month		
BUSINESS CASH RECEIPTS		
Cash Sales		
Account Receivable Collection		
Loans/Borrowing from Outside Sources (attach list to this report)		
Rental Income		
Sale of Business Assets (attach list to this report)		
Other (specify) (attach list to this report)		
Total Business Receipts		
BUSINESS CASH DISBURSEMENTS		
Net Payroll (Excluding Self)		
Salary Paid to Debtor or Owner's Draw (e.g., transfer to Household Account)		
Taxes - Payroll		
Taxes - Sales		
Taxes Other (attach schedule)		
Contract Labor (Subcontractors)		
Inventory Purchases		
Secured/Lease Payments (Business)		
Utilities (Business)		
Insurance		
Vehicle Expenses		
Travel & Entertainment		
Repairs and Maintenance		
Supplies		
Charitable Contributions/Gifts		
Purchase of Fixed Assets		
Advertising		
Bank Charges		
Other (attach schedule)		
Total Business Disbursements		
CASH - End of Month (Must equal reconciled bank statement - Attachment No. 2)		

MONTHLY OPERATING REPORT -
INDIVIDUAL

ATTACHMENT NO. 1

QUESTIONNAIRE		
	YES*	NO
1. Have any assets been sold or transferred outside the normal course of business during this reporting period?		
2. Have any funds been disbursed from any account other than a debtor in possession account?		
3. Are any post-petition receivables (accounts, notes, or loans) due from any relatives, insiders, or related party?		
4. Have any payments been made on pre-petition liabilities this reporting period?		
5. Have any post-petition loans been received by the debtor from any party?		
6. Are any post-petition payroll taxes past due?		
7. Are any post-petition state or federal income taxes past due?		
8. Are any post-petition state or local sales taxes past due?		
9. Are any post-petition real estate taxes past due?		
10. Are any amounts owed to post-petition creditors/vendors delinquent?		
11. Are any wage payments past due?		

*If the answer to any of the above questions is "YES," provide a detailed explanation of each item on a separate sheet.

INSURANCE INFORMATION		
	YES	NO*
1. Are real and personal property, vehicle/auto, general liability, fire, theft, worker's compensation, and other necessary insurance coverages in effect?	X	
2. Are all premium payments current?	X	

*If the answer to any of the above questions is "NO," provide a detailed explanation of each item on a separate sheet.

CONFIRMATION OF INSURANCE				
TYPE OF POLICY	CARRIER	Period of Coverage	Payment Amount and Frequency	Delinquency Amount

Check here if United States Trustee has been listed as a Certificate Holder on all policies of insurance

DESCRIBE PERTINENT DEVELOPMENTS, EVENTS, AND MATTERS DURING THIS REPORTING PERIOD:
Estimated Date of Filing the Plan of Reorganization and Disclosure Statement: _____

MONTHLY OPERATING REPORT -
INDIVIDUAL

ATTACHMENT NO. 2

BANK ACCOUNT RECONCILIATIONS

Bank Account Information		Account #1	Account #2	Account #3	Account #4
Name of Bank:	Santitas XXXXXXXXXXXXXXXXXXXX 4818				
Account Number:	P. 1111111111				
Purpose of Account (Business/Personal)	P. 1111111111				
Type of Account (e.g. checking)	checking				
1. Balance per Bank Statement					
2. ADD: Deposits not credited (attach list to this report)					
3. SUBTRACT: Outstanding Checks (attach list)					
4. Other Reconciling Items (attach list to this report)					
5. Month End Balance (Must Agree with Books)					
TOTAL OF ALL ACCOUNTS					\$

Note: Attach a copy of the bank statement and bank reconciliation for each account.

[illegible]

Note: Attach a copy of each investment account statement.

1. The first part of the document is a header section containing the following information:

 a. The name of the company: "ABC Corporation"

 b. The address: "123 Main Street, Suite 500, New York, NY 10001"

 c. The contact information: "Phone: (212) 555-1234, Email: info@abc.com"

 2. The second part of the document is a table with the following columns:

 a. "Product Name"

 b. "Quantity"

 c. "Unit Price"

 d. "Total Price"

 3. The third part of the document is a paragraph describing the terms of the agreement:

 a. "This agreement is made between ABC Corporation and XYZ Company, dated this 1st day of January, 2023."

 b. "The purpose of this agreement is to establish the terms of the purchase of goods from ABC Corporation by XYZ Company."

 c. "The goods to be purchased are described in the attached schedule."

 d. "The price of the goods shall be as set forth in the attached schedule."

 e. "The payment terms shall be net 30 days."

 f. "The delivery terms shall be FOB New York."

 g. "This agreement shall be governed by the laws of the State of New York."

 h. "In witness whereof, the parties have hereunto set their hands and seals the day and date first above written."

 4. The fourth part of the document is a signature block containing the following information:

 a. The signature of the representative of ABC Corporation: "John Doe"

 b. The signature of the representative of XYZ Company: "Jane Smith"

 5. The fifth part of the document is a footer section containing the following information:

 a. The name of the company: "ABC Corporation"

 b. The address: "123 Main Street, Suite 500, New York, NY 10001"

 c. The contact information: "Phone: (212) 555-1234, Email: info@abc.com"

1. The first step in the process of the investigation is the identification of the problem. This is done by the investigator who is responsible for the investigation. The investigator must identify the problem and the scope of the investigation. The investigator must also identify the objectives of the investigation. The investigator must then develop a plan of action to address the problem. The plan of action should include the methods to be used, the resources to be used, and the timeline for the investigation. The investigator should then implement the plan of action and collect data. The data should then be analyzed and the results should be reported. The investigator should also provide recommendations based on the results of the investigation.

[The page contains approximately 20 horizontal lines of extremely faint, illegible handwriting.]